



Application for a Wastewater Storage or Treatment Facility Permit

Send completed application to:

Solid Waste Permits Section
Office of Land Quality
PO Box 6015
Indianapolis, Indiana 46206-6015

Fax @ (317) 232-3403

or Call @ (317) 232-8731 or
@ (800) 451-6027 ext 2-8553 or 2-8731

Pursuant to 13-18-12 and 327 IAC 7.1

1. Fill out the application completely and submit all maps and additional information as requested. Storage or treatment facility construction plans, specifications and operational plans must be included with the application. Incomplete applications may result in a denial of the application.
2. **An application for renewal must be received prior to the expiration of the existing permit**, otherwise it will be treated as a new facility application and continued use of the facility will not be allowed until it is re-approved and the 18 day appeal period has lapsed. Application for a new facility should be submitted at least ninety (90) days prior to the date that construction is proposed to start.
3. Existing unapproved storage or treatment facilities must meet all requirements and must be permitted prior to their continued use.
4. For all **new or unapproved** storage or treatment facilities, the affidavit and certified mail notification to the health, planning and zoning departments in the county where the facility is to be located, all adjoining property owners and/or occupants and potentially affected persons of application submittal, must be completed and returned with the application. Names and addresses must be complete and legible in order for final notification by IDEM.
5. Submit the application via a carrier that has a tracking system of delivery.

Please type or print

APPLICANT INFORMATION

Name of applicant: _____

Business name: _____

Address: _____

City, State, Zip: _____

Telephone: AC _____ / _____

Wastewater Management Permit Number: _____

County in which the facility is located: _____

Road intersection nearest the facility: _____

Nearest City or Town: _____

PROPERTY OWNER INFORMATION

1. Owner: _____

2. Address: _____

3. City, State, Zip: _____

4. Telephone: AC _____ / _____

5. Attach form (Agreement to Properly Close a Wastewater Storage or Treatment Facility) to be completed by the property owner or permittee, accepting responsibility for proper closure of the facility.

Wastewater Storage or Treatment Facility Location

1. Submit a county map clearly indicating the location of the property on which the facility is proposed or existing. Specify the county, political township, section, range and township where the facility is located

County _____ Political township _____

Section _____ Range _____ Township _____

2. Submit a soil survey map from the National Resource Conservation Service. The map must clearly indicate the location of the storage or treatment facility in order to classify the soil types and watertable levels.
3. Submit an accurate drawing which indicates the direction North, the scale used (1"=100'), and which clearly delineates the location of the storage or treatment facility site and the area within a 1/4 mile radius. The facility must not be constructed in a flood plain. The drawing must clearly indicate all of the following and their setbacks.

Setbacks for Wastewater Storage or Treatment Facilities

- | | |
|---|-----------|
| 1. Public water supply well or public water supply surface intake structure, historical site or the critical habitat of endangered or threatened species. | 1000 feet |
| 2. Residence, places of business, public gathering place, property line, lake, pond, stream, intermittent waterway, surface water impoundment, wetland, rock outcrop, sinkhole, undrained depression or potable water supply. | 600 feet |
| 3. Public road. | 300 feet |
| 4. Easement. | 100 feet |
4. Submit a narrative for the storage or treatment facility that outlines the design, capacity, operational plan, maintenance procedures and name, address and phone number of the person or persons designated in charge of the facility.
 5. Submit complete construction plans and specifications certified by a professional engineer licensed under IC 25-31-1 to practice in Indiana.

Agreement to Properly Close a Wastewater Storage or Treatment Facility

327 IAC 7.1-4-11 states “a treatment or storage facility that is no longer being operated or used must be closed”. It is the responsibility of the permittee or the property owner, whoever signed the statement submitted pursuant to 327 IAC 7.1-4-1(c)(8), to properly close the facility. As the permittee or property owner, you are required to comply with the following steps when the facility is to be closed:

1. The commissioner shall be notified at least thirty (30) days in advance that the facility is to be closed.
2. Closure must be completed within one hundred twenty (120) days after the initial notification.
3. The contents of a facility must be disposed of in a manner consistent with Article 327 IAC 7.1, Rule 7, Wastewater Disposal.
4. Aboveground facilities must be dismantled and removed.
5. Earthen facilities must be: cleaned and leveled or filled with earth, and the appurtenances removed or closed in an alternative manner equally protective of human health and the environment that has been approved by the commissioner; and the site shall be returned approximately to its natural contours and be mounded to allow for settling and to divert surface waters.
6. A notarized statement indicating that these requirements have been met must be sent to the commissioner within thirty (30) days after completion of the closure. The commissioner then has ninety (90) days to determine if the closure is adequate.

I agree to comply with all the facility closure requirements listed above.

Signature of party responsible for closure

Date of signature

State of Indiana

County of _____

Before me a Notary Public in and for said County and State, _____ personally appeared, and being sworn by me upon my oath, says that the fact stated in the foregoing instrument are true. Signed and sealed this _____ day of _____, 20____.

Signature _____

Printed _____

My Commission expires _____

Resident of _____ County.

The following sworn statement is required from the applicant, which must be included with the application, for all **new or previously unpermitted wastewater storage or treatment facilities**.

Affidavit

I, _____, being duly sworn upon oath, deposes and says:

I live in _____ County, Indiana, and being of sound mind and over twenty-one (21) years of age, I am competent to give this affidavit.

By virtue of my position with _____ (business name).

I am authorized to make the representation contained in this affidavit. I understand that the notice requirements of IC 13-15-8 apply to _____ (business name).

For purposes of a new or previously unpermitted storage or treatment facility application, as required by IC 13-15-8, the applicant will send written notice by certified mail to the health, planning and zoning departments in the county where the facility is located and to all adjacent landowners and/or occupants no later than ten (10) days after submission of the application.

Filed on behalf of _____ (business name).

Further Affiant Saith Not.

I affirm under the penalty for perjury that the representations contained in this affidavit are true, to the best of my information and belief.

Date

Signature of Affiant

Printed Name of Affiant

State of Indiana

County of _____

Before me a Notary Public in and for said County and State, _____ personally appeared, and being first duly sworn by me upon oath, says that the facts stated in the foregoing instrument are true. Signed and sealed this _____ day of _____, 20_____.

Signature: _____

Printed: _____

My Commission Expires: _____

Residence of _____ County.

For all **new or previously unpermitted facilities**, make additional copies beforehand, as needed, then fill out

Notification to the health, planning and zoning departments in the county where the storage or treatment facility is to be located and to all adjoining property owners and/or occupants of a wastewater storage or treatment facility application submitted to the Indiana Department of Environmental Management.

Notification date_____

As a department head or an adjoining property owner and/or occupant, of the property listed below, you are hereby notified, in accordance with IC 13-15-8, that the applicant, listed below, has applied for a permit for a storage or treatment facility at the following location:

Applicants name:_____

Location of facility:

Landowner: _____
County: _____
Political township: _____
Range: _____
Township: _____
Section: _____

The application was submitted to IDEM on_____

If the location identified above is found to meet the requirements set forth in 327 IAC 7.1 then the location will be permitted for a storage or treatment facility. Your name and address have been provided to IDEM so that you may be notified of the final decision regarding the application

Questions regarding the wastewater storage or treatment facility should be addressed to the applicants contact person listed below.

Contact person name: _____
Address: _____
City: _____
State: _____
Zip Code: _____
Phone number: _____

If this is a **new or previously unpermitted facility** you must list all potentially affected persons who may be affected by the issuance of this permit. The list must include the health, planning and zoning departments in the county where the facility is located plus all property owners and/or occupants adjoining the facility. Failure to identify any of the above may result in the issued permit being challenged and rendered void. More information about the Administrative Orders and Procedures Act is found on the next page of this application.

Name _____

Address _____

City, State, Zip _____

Name _____

Address _____

City, State, Zip _____

Name _____

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City, State, Zip _____

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City, State, Zip _____

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City, State, Zip _____

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City, State, Zip _____

Name _____

Address _____

City, State, Zip _____

Name _____

Address _____

City, State, Zip _____

Administrative Orders and Procedures Act, IC 4-21.5

The Administrative Orders and Procedures Act requires that this agency give notice of its decision on your application to the following persons:

- a) each person to whom the decision is specifically directed;
- b) each person to whom a law requires notice by given;
- c) each competitor who has applied to this agency for a mutually exclusive permit, if issuance is the subject of the decision and the competitor's application has not been denied in an order for which all rights to judicial review have been waived or exhausted;
- d) each person who has provided this agency with a written request for notification of the decision;
- e) each person who has a substantial and direct proprietary interest in the issuance; or
- f) each person whose absence as a party in the proceeding concerning the decision would deny another party complete relief in the proceeding or who claims an interest related to the issuance is so situated that the disposition of the matter, in the person's absence may:
 - 1) as a practical matter impair or impede the person's ability to protect that interest, or
 - 2) leave any other person who is a party to a proceeding concerning the issuance subject to a substantial risk of incurring multiple or otherwise inconsistent obligations by reason of the person's claimed interest.

The Administrative Orders and Procedures Act provides that this agency may request your assistance in identifying these persons. Please list all persons whom you have reason to believe have a substantial or proprietary interest in this matter, or could otherwise be considered to be potentially affected under the law. Failure to notify a person who is later determined to be potentially affected could result in avoidance of the decision on procedural grounds. To ensure conformance with the Administrative Orders and Procedures Act and to avoid reversal of the decision, please list all such persons.

**ALL APPLICANTS MUST FILL OUT THIS DISCLOSURE
STATEMENT AND RETURN IT WITH THEIR APPLICATION.**

1. Has the applicant been convicted of a crime under IC 13-30-6 (Environmental Offenses) or IC 36-9-30-35 (Solid waste collection and disposal; violations)?

NO _____ , YES _____ , if yes, when did this occur? _____ ,
please elaborate;

2. Has the applicant's previous permit to operate been revoked under IC 13-15-7 (Revocation or Modification of Permits for Cause)?

NO _____ , YES _____ , if yes, when did this occur? _____ ,
please elaborate;

3. Does the applicant have a history of one (1) or more violations of IC 13 (Environment) or rules promulgated by authority of IC 13?

NO _____ , YES _____ , if yes, when did this occur? _____ ,
please elaborate;

4. Has the applicant been subject to one (1) or more administrative or judicial enforcement actions concerning wastewater management under 327 IAC 7.1 (Wastewater Management) previously 327 IAC 7?

NO _____ , YES _____ , if yes, when did this occur? _____ ,
please elaborate;

5. Is the applicant subject to one (1) or more pending administrative or judicial enforcement actions commenced under IC 13 (Environment)?

NO _____ , YES _____ , if yes please elaborate;

**ALL INFORMATION CONTAINED ABOVE IS TRUE AND ACCURATE. ANY
INFORMATION PROVIDED ABOVE THAT WAS KNOWINGLY INCORRECT
MAY SUBJECT THE SIGNATORY TO THE PENALTY FOR PERJURY
UNDER IC 35-44-2-1.**

Applicant/Responsible Party

Date